

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known)

Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name The Meatpackers, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 35-2573784

4. Debtor's address Principal place of business

1-3 Little West 12th Street
New York, NY 10014

Number, Street, City, State & ZIP Code

New York
County

Mailing address, if different from principal place of business

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

FILED
U.S. BANKRUPTCY COURT
2019 MAR -6 P 3:18
SOUTHERN DISTRICT OF NEW YORK

Debtor The Meatpackers, Inc.
Name

Case number (if known) _____

7. Describe debtor's business A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9

☒ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **The Meatpackers, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☒ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **The Meatpackers, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

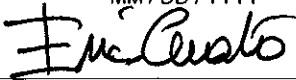
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 5, 2019
MM / DD / YYYY

x 

Signature of authorized representative of debtor

Eric Cerato

Printed name

Title CEO

18. Signature of attorney

X

Signature of attorney for debtor

Date

MM / DD / YYYY

Printed name

Firm name

Number, Street, City, State & ZIP Code

Contact phone

Email address

Bar number and State

Fill in this information to identify the case:

Debtor name The Meatpackers, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.


I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- ☒ Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- ☒ Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- ☐ Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- ☐ Schedule H: Codebtors (Official Form 206H)
- ☐ Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- ☒ Amended Schedule _____
- ☒ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 5, 2019

X


Signature of individual signing on behalf of debtor

Eric Cerato

Printed name

CEO

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **The Meatpackers, Inc.**
United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**
Case number (if known): _____

☐ Check if this is an
amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
All Covered Dept 33163 PO Box 39000 San Francisco, CA 94139-3163		Business Contractor				\$13,000.00
Baldor PO Box 5411 New York, NY 10087-5411		Business Vendor				\$12,176.13
Berkley Luxury Group MJD3 Associates 551 Fifth Avenue, 5th Floor New York, NY 10005		Business Insurance Provider				\$49,255.34
Con Edison 4 Irving Place New York, NY 10003		Utility Service				\$7,674.98
Cooling Guard 65-21 Grand Avenue Maspeth, NY 11378		HVAC Contractor Services				\$98,000.00
D'Artagnan 600 Green Lane Union, NJ 07083		Business Vendor				\$10,469.16
Dairyland P.O. Box 30943 New York, NY 10087-0943		Business Vendor				\$10,727.93
Driscoll 6 Westbelt Wayne, NJ 07470		Business Vendor				\$12,266.19
Fortessa 20412 Bashan Drive Ashburn, VA 20147		Business Supplies Vendor				\$6,773.97
FSI 307 7th Avenue Suite 1001 New York, NY 10001		Architect Services				\$134,000.00

Debtor **The Meatpackers, Inc.**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Grand CRU Selections 5 West 19th Street 3rd Floor New York, NY 10011		Business Vendor				\$7,410.00
Jean Imbert 2 Square De Padirac 75016 Paris France		Business Contractor				\$120,202.00
M. Tucker 1200 Madison Avenue Paterson, NJ 07503-2813		Business Supplies Vendor				\$18,171.00
Nathaniel Muller Law Office of Nathaniel Muller 1270 Broadway, Suite 806 New York, NY 10001		Legal Fees				\$40,000.00
Skurnik Wines, Inc. 100 Jericho Quadrangle Suite 140 Jericho, NY 11753		Business Vendor				\$8,814.66
Victoria Migliore 35 Bis Rue Jean De La Fontaine 75016 Paris France		Business Contractor				\$7,500.00
Violaine Et Jeremy 66 Boulevard Voltaire 75011 Paris France		Business Contractor				\$9,212.67
West Village 177 Christopher Street New York, NY 10014		Rental Arrears				\$380,000.00
William Blanchet Blanchet CPA PLLC 2047 Locust Street, Suite 3F Philadelphia, PA 19103		Business Contractor				\$12,500.00
Wilson Daniels Wholesale LLC 19 West 24th Street 7th Floor New York, NY 10010		Business Vendor				\$11,180.77

Fill in this information to identify the case:

Debtor name The Meatpackers, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address All Covered Dept 33163 PO Box 39000 San Francisco, CA 94139-3163 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$13,000.00</u>
3.2	Nonpriority creditor's name and mailing address Angel's Share Wine Imports LLC 106 Ferris Street Unit 1L Brooklyn, NY 11231 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$512.00</u>
3.3	Nonpriority creditor's name and mailing address AP Wine Imports 110 West 40th Street Suite 501 New York, NY 10018 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,616.66</u>
3.4	Nonpriority creditor's name and mailing address Autotap Corporation 958 Grand Street Brooklyn, NY 11201 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$732.50</u>

Debtor The Meatpackers, Inc.		Case number (if known) _____	
Name _____			
3.5	Nonpriority creditor's name and mailing address Baldor PO Box 5411 New York, NY 10087-5411 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$12,176.13</u>
3.6	Nonpriority creditor's name and mailing address Berkley Luxury Group MJD3 Associates 551 Fifth Avenue, 5th Floor New York, NY 10005 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Insurance Provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$49,255.34</u>
3.7	Nonpriority creditor's name and mailing address Black Diamond Gourmet 1581 McDonald Avenue Brooklyn, NY 11230 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$801.00</u>
3.8	Nonpriority creditor's name and mailing address Blue Moon Acres PO Box 201 Buckingham, PA 18912 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$302.25</u>
3.9	Nonpriority creditor's name and mailing address Chef Collective LLC 100 Prince Street Brooklyn, NY 11201 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$200.00</u>
3.10	Nonpriority creditor's name and mailing address Comstar Technologies 1155 Phoneixville Pike Suite 114-115 West Chester, PA 19380 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>IT Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,255.64</u>
3.11	Nonpriority creditor's name and mailing address Con Edison 4 Irving Place New York, NY 10003 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,674.98</u>

Debtor **The Meatpackers, Inc.**

Name

Case number (if known)

3.12	Nonpriority creditor's name and mailing address Cooling Guard 65-21 Grand Avenue Maspeth, NY 11378 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>HVAC Contractor Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$98,000.00</u>
3.13	Nonpriority creditor's name and mailing address Cross Fire and Security 1756 86th Street N.Y.S. Dept of State Brooklyn, NY 11214 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,400.00</u>
3.14	Nonpriority creditor's name and mailing address D'Artagnan 600 Green Lane Union, NJ 07083 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$10,469.16</u>
3.15	Nonpriority creditor's name and mailing address Dairyland P.O. Box 30943 New York, NY 10087-0943 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$10,727.93</u>
3.16	Nonpriority creditor's name and mailing address Driscoll 6 Westbelt Wayne, NJ 07470 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$12,266.19</u>
3.17	Nonpriority creditor's name and mailing address Duclot La Vinicole, LLC PO Box 101 Manhasset, NY 11030 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,810.00</u>
3.18	Nonpriority creditor's name and mailing address Early Morning Seafood 120 Jackson Valley Road Oxford, NJ 07863 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,656.96</u>

Debtor **The Meatpackers, Inc.**

Case number (if known)

Name

3.19	Nonpriority creditor's name and mailing address Ecolab 26252 Network Place Chicago, IL 60673-1262 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,634.01</u>
3.20	Nonpriority creditor's name and mailing address Ecolab Pest Elimination 26252 Network Place Chicago, IL 60673-1262 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,015.01</u>
3.21	Nonpriority creditor's name and mailing address Empire Merchants 16 Bridgewater Street Brooklyn, NY 11222 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,420.94</u>
3.22	Nonpriority creditor's name and mailing address Foraged and Founds PO Box 31722 Seattle, WA 98103 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,148.50</u>
3.23	Nonpriority creditor's name and mailing address Fortessa 20412 Bashan Drive Ashburn, VA 20147 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supplies Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,773.97</u>
3.24	Nonpriority creditor's name and mailing address FSI 307 7th Avenue Suite 1001 New York, NY 10001 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Architect Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$134,000.00</u>
3.25	Nonpriority creditor's name and mailing address Gaeta 25 Van Street Staten Island, NY 10310 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,000.00</u>

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3.26	Nonpriority creditor's name and mailing address Grand CRU Selections 5 West 19th Street 3rd Floor New York, NY 10011 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,410.00
3.27	Nonpriority creditor's name and mailing address Grow NYC 100 Gold Street Suite 3300 New York, NY 10038 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$796.75
3.28	Nonpriority creditor's name and mailing address Happy Valley Meat Company PO Box 2549 Astoria, NY 11102 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
3.29	Nonpriority creditor's name and mailing address Haskell's Seafood 4603 Middle County Road Calverton, NY 11933 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,392.25
3.30	Nonpriority creditor's name and mailing address Icesurance 500 Fenimore Road Mamaroneck, NY 10543 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,519.90
3.31	Nonpriority creditor's name and mailing address Independence Wine and Spirits 165 Eileen Way 2nd Floor Suite D Syosset, NY 11791 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,621.15
3.32	Nonpriority creditor's name and mailing address Island Creek Oyster 630 Flushing Avenue Brooklyn, NY 11206 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.00

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3.33	Nonpriority creditor's name and mailing address Jean Imbert 2 Square De Padirac 75016 Paris France Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$120,202.00</u>
3.34	Nonpriority creditor's name and mailing address Johanna Kolodny 8 West 19th Street Apt # 4 New York, NY 10011 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,000.00</u>
3.35	Nonpriority creditor's name and mailing address Korin 233 Broadway Suite 1801 New York, NY 10279 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supplies Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,067.48</u>
3.36	Nonpriority creditor's name and mailing address Lobster Place 405 Barretto Street Bronx, NY 10474 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,414.14</u>
3.37	Nonpriority creditor's name and mailing address M.S. Walker 975 University Avenue Attn Credit Norwood, MA 02062 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,204.00</u>
3.38	Nonpriority creditor's name and mailing address M.Tucker 1200 Madison Avenue Paterson, NJ 07503-2813 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supplies Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$18,171.00</u>
3.39	Nonpriority creditor's name and mailing address Manhattan Fire and Safety 242 W 30th Street Room 701 New York, NY 10001 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,849.32</u>

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3.40	Nonpriority creditor's name and mailing address Martin Bournhonesque 814A Portero Avenue San Francisco, CA 94110 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,512.00
3.41	Nonpriority creditor's name and mailing address Martin Scott Wines New York 31 West 27th Street 7th Floor New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,658.00
3.42	Nonpriority creditor's name and mailing address Masterfire Prevention 1776 East Tremont Avenue Bronx, NY 10460 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.43	Nonpriority creditor's name and mailing address MHW Ltd./Haus Alpenz USA 1129 Northern Blvd Manhasset, NY 11030 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$258.00
3.44	Nonpriority creditor's name and mailing address Multivac 11021 N Pomona Avenue Kansas City, MO 64153 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supplies Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$387.20
3.45	Nonpriority creditor's name and mailing address Nathaniel Muller Law Office of Nathaniel Muller 1270 Broadway, Suite 806 New York, NY 10001 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Legal Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,000.00
3.46	Nonpriority creditor's name and mailing address Norwich Meadows Farm 105 Old Stone Road Norwich, NY 13815 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,550.25

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3.47	Nonpriority creditor's name and mailing address NYC Fire Department 9 Metro Tech Center Cashier's Office Brooklyn, NY 11201-3857 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,315.00
3.48	Nonpriority creditor's name and mailing address OCG Internet/Phone Services 79-24 71st Avenue Ridgewood, NY 11385 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,600.00
3.49	Nonpriority creditor's name and mailing address Opinel USA 4118 N Nashville Avenue Chicago, IL 60634 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supplies Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,020.00
3.50	Nonpriority creditor's name and mailing address Piccini Brothers 633 9th Avenue Front 1 New York, NY 10036 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,724.25
3.51	Nonpriority creditor's name and mailing address Plantin 9 East 47th Street Suite 3 New York, NY 10017 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$639.54
3.52	Nonpriority creditor's name and mailing address PM Spirits Distributing Corp PO Box 370736 Brooklyn, NY 11237 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,457.00
3.53	Nonpriority creditor's name and mailing address Polaner Selection 19 N Moser Avenue Suite A Mount Kisco, NY 10549 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,516.23

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Name

3.54	Nonpriority creditor's name and mailing address Propulse 2 Rue Jean-Baptiste Lallemand 21000 Dijon France Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,500.00</u>
3.55	Nonpriority creditor's name and mailing address S.K.I. Beer Corp. 169 Gardner Avenue Brooklyn, NY 11237 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$269.74</u>
3.56	Nonpriority creditor's name and mailing address Sam Morris 1577 York Avenue Suite 4C New York, NY 10028 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,500.00</u>
3.57	Nonpriority creditor's name and mailing address Skurnik Wines, Inc. 100 Jericho Quadrangle Suite 140 Jericho, NY 11753 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$8,814.66</u>
3.58	Nonpriority creditor's name and mailing address Southern Glazer's of NY Metro PO Box 3143 Hicksville, NY 11802 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,992.57</u>
3.59	Nonpriority creditor's name and mailing address T. Edward Wines LTD Accounting Office PO Box 242 Gardiner, NY 12525 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$870.00</u>
3.60	Nonpriority creditor's name and mailing address T.Elenteny Imports 285 W. Broadway Suite 500 New York, NY 10013 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,188.00</u>

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3.61	Nonpriority creditor's name and mailing address To Rise Supplies 118-40 Montauk Street Saint Albans, NY 11412 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supplies Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$943.99
3.62	Nonpriority creditor's name and mailing address Union Beer Distributors 1213-17 Grand Street Brooklyn, NY 11211 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$171.37
3.63	Nonpriority creditor's name and mailing address Verity Wines LLC PO Box 1826 New York, NY 10156 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$828.00
3.64	Nonpriority creditor's name and mailing address Victoria Migliore 35 Bis Rue Jean De La Fontaine 75016 Paris France Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,500.00
3.65	Nonpriority creditor's name and mailing address Violaine Et Jeremy 66 Boulevard Voltaire 75011 Paris France Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,212.67
3.66	Nonpriority creditor's name and mailing address W.B. Mason 59 Centre Street Brockton, MA 02301 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supplies Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,768.28
3.67	Nonpriority creditor's name and mailing address West Village 177 Christopher Street New York, NY 10014 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rental Arrears</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$380,000.00

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3.68	Nonpriority creditor's name and mailing address White Plains Linen 4 John Walsh Boulevard Peekskill, NY 10566 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Supplies Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,195.73
3.69	Nonpriority creditor's name and mailing address William Blanchet Blanchet CPA PLLC 2047 Locust Street, Suite 3F Philadelphia, PA 19103 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,500.00
3.70	Nonpriority creditor's name and mailing address Wilson Daniels Wholesale LLC 19 West 24th Street 7th Floor New York, NY 10010 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,180.77
3.71	Nonpriority creditor's name and mailing address Winebow Headquarters 4800 Cox Road Suite 300 Glen Allen, VA 23060 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,715.84
3.72	Nonpriority creditor's name and mailing address Yves Muller Banym 1270 Broadway, Suite 806 New York, NY 10001 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

		Total of claim amounts	
5a.	\$		0.00
5b.	+	\$	1,072,970.25
5c.	\$		1,072,970.25

**United States Bankruptcy Court
Southern District of New York**

In re **The Meatpackers, Inc.**

Debtor(s)

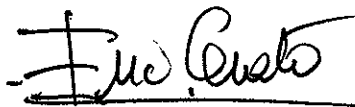
Case No.
Chapter

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VERIFICATION OF CREDITOR MATRIX

I, the CEO of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **March 5, 2019**



Eric Cerato/CEO
Signer/Title

ALL COVERED
DEPT 33163
PO BOX 39000
SAN FRANCISCO, CA 94139-3163

ANGEL'S SHARE WINE IMPORTS LLC
106 FERRIS STREET
UNIT 1L
BROOKLYN, NY 11231

AP WINE IMPORTS
110 WEST 40TH STREET
SUITE 501
NEW YORK, NY 10018

AUTOTAP CORPORATION
958 GRAND STREET
BROOKLYN, NY 11201

BALDOR
PO BOX 5411
NEW YORK, NY 10087-5411

BERKLEY LUXURY GROUP
MJD3 ASSOCIATES
551 FIFTH AVENUE, 5TH FLOOR
NEW YORK, NY 10005

BLACK DIAMOND GOURMET
1581 MCDONALD AVENUE
BROOKLYN, NY 11230

BLUE MOON ACRES
PO BOX 201
BUCKINGHAM, PA 18912

CHEF COLLECTIVE LLC
100 PRINCE STREET
BROOKLYN, NY 11201

COMSTAR TECHNOLOGIES
1155 PHONEIXVILLE PIKE
SUITE 114-115
WEST CHESTER, PA 19380

CON EDISON
4 IRVING PLACE
NEW YORK, NY 10003

COOLING GUARD
65-21 GRAND AVENUE
MASPETH, NY 11378

CROSS FIRE AND SECURITY
1756 86TH STREET
N.Y.S. DEPT OF STATE
BROOKLYN, NY 11214

D'ARTAGNAN
600 GREEN LANE
UNION, NJ 07083

DAIRYLAND
P.O. BOX 30943
NEW YORK, NY 10087-0943

DRISCOLL
6 WESTBELT
WAYNE, NJ 07470

DUCLOT LA VINICOLE, LLC
PO BOX 101
MANHASSET, NY 11030

EARLY MORNING SEAFOOD
120 JACKSON VALLEY ROAD
OXFORD, NJ 07863

ECOLAB
26252 NETWORK PLACE
CHICAGO, IL 60673-1262

ECOLAB PEST ELIMINATION
26252 NETWORK PLACE
CHICAGO, IL 60673-1262

EMPIRE MERCHANTS
16 BRIDGEWATER STREET
BROOKLYN, NY 11222

FORAGED AND FOUNDS
PO BOX 31722
SEATTLE, WA 98103

FORTESSA
20412 BASHAN DRIVE
ASHBURN, VA 20147

FSI
307 7TH AVENUE
SUITE 1001
NEW YORK, NY 10001

GAETA
25 VAN STREET
STATEN ISLAND, NY 10310

GRAND CRU SELECTIONS
5 WEST 19TH STREET
3RD FLOOR
NEW YORK, NY 10011

GROW NYC
100 GOLD STREET
SUITE 3300
NEW YORK, NY 10038

HAPPY VALLEY MEAT COMPANY
PO BOX 2549
ASTORIA, NY 11102

HASKELL'S SEAFOOD
4603 MIDDLE COUNTY ROAD
CALVERTON, NY 11933

ICESURANCE
500 FENIMORE ROAD
MAMARONECK, NY 10543

INDEPENDENCE WINE AND SPIRITS
165 EILEEN WAY
2ND FLOOR SUITE D
SYOSSET, NY 11791

ISLAND CREEK OYSTER
630 FLUSHING AVENUE
BROOKLYN, NY 11206

JEAN IMBERT
2 SQUARE DE PADIRAC
75016 PARIS
FRANCE

JOHANNA KOLODNY
8 WEST 19TH STREET
APT # 4
NEW YORK, NY 10011

KORIN
233 BROADWAY
SUITE 1801
NEW YORK, NY 10279

LOBSTER PLACE
405 BARRETTO STREET
BRONX, NY 10474

M.S. WALKER
975 UNIVERSITY AVENUE
ATTN CREDIT
NORWOOD, MA 02062

M. TUCKER
1200 MADISON AVENUE
PATERSON, NJ 07503-2813

MANHATTAN FIRE AND SAFETY
242 W 30TH STREET
ROOM 701
NEW YORK, NY 10001

MARTIN BOURNHONESQUE
814A PORTERO AVENUE
SAN FRANCISCO, CA 94110

MARTIN SCOTT WINES NEW YORK
31 WEST 27TH STREET
7TH FLOOR
NEW YORK, NY 10001

MASTERFIRE PREVENTION
1776 EAST TREMONT AVENUE
BRONX, NY 10460

MHW LTD./HAUS ALPENZ USA
1129 NORTHERN BLVD
MANHASSET, NY 11030

MULTIVAC
11021 N POMONA AVENUE
KANSAS CITY, MO 64153

NATHANIEL MULLER
LAW OFFICE OF NATHANIEL MULLER
1270 BROADWAY, SUITE 806
NEW YORK, NY 10001

NORWICH MEADOWS FARM
105 OLD STONE ROAD
NORWICH, NY 13815

NYC FIRE DEPARTMENT
9 METRO TECH CENTER
CASHIER'S OFFICE
BROOKLYN, NY 11201-3857

OCG INTERNET/PHONE SERVICES
79-24 71ST AVENUE
RIDGEWOOD, NY 11385

OPINEL USA
4118 N NASHVILLE AVENUE
CHICAGO, IL 60634

PICCINI BROTHERS
633 9TH AVENUE
FRONT 1
NEW YORK, NY 10036

PLANTIN
9 EAST 47TH STREET
SUITE 3
NEW YORK, NY 10017

PM SPIRITS DISTRIBUTING CORP
PO BOX 370736
BROOKLYN, NY 11237

POLANER SELECTION
19 N MOSER AVENUE
SUITE A
MOUNT KISCO, NY 10549

PROPULSE
2 RUE JEAN-BAPTISTE
LALLEMAND 21000 DIJON
FRANCE

S.K.I. BEER CORP.
169 GARDNER AVENUE
BROOKLYN, NY 11237

SAM MORRIS
1577 YORK AVENUE
SUITE 4C
NEW YORK, NY 10028

SKURNIK WINES, INC.
100 JERICHO QUADRANGLE
SUITE 140
JERICHO, NY 11753

SOUTHERN GLAZER'S OF NY METRO
PO BOX 3143
HICKSVILLE, NY 11802

T. EDWARD WINES LTD
ACCOUNTING OFFICE
PO BOX 242
GARDINER, NY 12525

T.ELENTENY IMPORTS
285 W. BROADWAY
SUITE 500
NEW YORK, NY 10013

TO RISE SUPPLIES
118-40 MONTAUK STREET
SAINT ALBANS, NY 11412

UNION BEER DISTRIBUTORS
1213-17 GRAND STREET
BROOKLYN, NY 11211

VERITY WINES LLC
PO BOX 1826
NEW YORK, NY 10156

VICTORIA MIGLIORE
35 BIS RUE JEAN DE LA FONTAINE
75016 PARIS
FRANCE

VIOLAINE ET JEREMY
66 BOULEVARD VOLTAIRE
75011 PARIS
FRANCE

W.B. MASON
59 CENTRE STREET
BROCKTON, MA 02301

WEST VILLAGE
177 CHRISTOPHER STREET
NEW YORK, NY 10014

WHITE PLAINS LINEN
4 JOHN WALSH BOULEVARD
PEEKSKILL, NY 10566

WILLIAM BLANCHET
BLANCHET CPA PLLC
2047 LOCUST STREET, SUITE 3F
PHILADELPHIA, PA 19103

WILSON DANIELS WHOLESALE LLC
19 WEST 24TH STREET
7TH FLOOR
NEW YORK, NY 10010

WINEBOW HEADQUARTERS
4800 COX ROAD
SUITE 300
GLEN ALLEN, VA 23060

YVES MULLER
BANYM
1270 BROADWAY, SUITE 806
NEW YORK, NY 10001